

Central Contractor Registration Form

Please type or print legibly in black ink. Information must be legible for registration to be processed in a timely manner.

This form is to be printed out and faxed or mailed to the fax number or address at the bottom of the form.

(M) = Mandatory field. Data must be entered for registration to be complete.

General Information

DUNS Number¹ (M): _____ CAGE Code² (M) if foreign: _____

Legal Business Name (M): _____

Doing Business As: _____

Tax ID #³ (M): _____ OR Social Security Number: _____

Division Name: _____ Division Number: _____

Physical Address (M): _____

City (M): _____ State (M): _____

Zip/Postal Code (M): _____ Country (M): _____

Mailing Address: _____ City: _____ State: _____ Zip Code: _____

Business Start Date (M): _____ Number of Employees (M): _____

Fiscal Year Close Date (M): _____ Annual Revenue (M): _____

Type of Organization (M):

- ☐ Sole Proprietorship ☐ Partnership ☐ Corporate Entity (Tax Exempt)
- ☐ Corporate Entity (Not Tax Exempt) ☐ Federal, State or Local Government ☐ Foreign Government
- ☐ International Organization ☐ Other

State of Incorporation (M): _____ or Country: _____

Business Type(s) (M):

- ☐ Tribal Government
- ☐ Municipality
- ☐ Nonprofit Institution
- ☐ 8(a) Program Participant
- ☐ Woman Owned Business
- ☐ Surplus Dealer
- ☐ American Indian Owned
- ☐ S Corporation
- ☐ Educational Institution

- ☐ Sheltered Workshop
- ☐ Construction Firm
- ☐ Foreign Supplier
- ☐ Minority Owned Business
- ☐ Manufacturer of Goods
- ☐ Veteran Owned
- ☐ Labor Surplus Area Firm
- ☐ Research Institute

- ☐ Emerging Business/Other Unlisted Type
- ☐ Historically Black College/University
- ☐ Hub Zone
- ☐ Service Location
- ☐ Small Business
- ☐ Small Disadvantaged Business
- ☐ Subgroup
- ☐ Limited Liability Company

1. Data Universal Numbering System (DUNS)– Call Dun & Bradstreet at 1-800-333-0505 or 1-610-882-7000 if unsure.
2. Commercial and Government Entity (CAGE) Code – If you do not have a CAGE Code, one will be assigned to you, call DLIS – Defense Logistics Information Services at 1-888-352-9333 Option 3 if unsure, or check CAGE search web [<http://www.dlis.dla.mil/CAGESearch/>](http://www.dlis.dla.mil/CAGESearch/).
3. Taxpayer Identification Number (TIN) – Call the IRS at 1-800-829-1040 if unsure. The TIN may be used by the Government to collect and report on any delinquent amounts arising out of the offeror's relationship with the Government (31 U.S.C. 7701 (c) (3)).

Goods and Services:

NAICS Codes **(M)** North American Industrial Classification Code to identify what product or service your business provides (6 digit numeric). Search on <http://www.naics.com/search.htm>
<http://www.census.gov/epcd/www/naicstab.htm>

NAICS Code: _____ NAICS Code: _____ NAICS Code: _____

NAICS Code: _____ NAICS Code: _____ NAICS Code: _____

SIC Codes **(M)** Standard Industrial Classification Codes identify what type of activity your business performs (4 or 8 digit numeric). Search on <http://www.osha.gov/oshstats/sicser.html>

SIC Code: _____ SIC Code: _____ SIC Code: _____

SIC Code: _____ SIC Code: _____ SIC Code: _____

PSC Codes (Optional) Product Service Codes are similar to SIC Codes. PSC Codes are used only to identify services (4 digit alpha-numeric). Search on <http://fpdsweb2.gsa.gov/fpdsweb/PscWiz>

PSC Code: _____ PSC Code: _____ PSC Code: _____

PSC Code: _____ PSC Code: _____ PSC Code: _____

FSC Codes (Optional) Federal Supply Classification Codes, FSC Codes are used to identify products (4 digit numeric). Search on <http://www.dlis.dla.mil/h2> or <http://www.dlis.dla.mil/PDFs/h2.pdf>

FSC Code: _____ FSC Code: _____ FSC Code: _____

FSC Code: _____ FSC Code: _____ FSC Code: _____

Electronic Funds Transfer (EFT) Information:

Financial Institution Name **(M)**: _____

ABA Routing Number **(M)**: _____

Account Number **(M)**: _____ Must indicate type of account **(M)**
☐ Checking OR ☐ Savings

Lockbox Number: _____ Authorization Date **(M)**: _____

Automated Clearing House (ACH=Bank) **(M)** at least one method of contact must be entered

ACH Phone Number: _____ ACH Fax: _____

ACH International Phone: _____ Ext. _____

ACH Email: _____

Do you (the Registrant) use or accept Credit Cards ☐ Yes ☐ No

as a method of Purchase or Payment? **(M)**:

Address Information:

Remittance Address **(M)** (If EFT is unavailable, where would you like the check mailed?)

Name: _____

Address: _____

City, State, Zip/Postal Code _____

Country: _____

Mailing Address Information **(M)** if other than your legal address identified on the General Information Page. P.O. Box is acceptable here.

Name: _____

Address: _____

City, State, Zip/Postal Code: _____

Country: _____

Registration Acknowledgement and Point of Contact Information:

Note: The Registrant acknowledges that the information provided is current, accurate, and complete.

Point of Contact Name **(M)**: _____

Phone Number **(M)**: _____ Ext.: _____

International Phone Number: _____ Ext.: _____

Please check method of preferred contact for CCR-related issues:

☐ Us mail

☐ Fax: _____

☐ Email: _____

Alternate Point of Contact Information **(M)**:

Name **(M)**: _____

Phone Number **(M)**: _____ Ext.: _____

International Phone Number: _____ Ext.: _____

Registration Acknowledgement and Point of Contact Information continued:

Accounts Receivable Contact **(M)**:

Name **(M)**: _____

Phone Number **(M)**: _____ Ext.: _____

International Phone Number: _____ Ext.: _____

Fax: _____ Email: _____

Owner Information **(M)** if Sole Proprietorship:

Name: _____

Phone Number: _____ Ext.: _____

International Phone Number: _____ Ext.: _____

Fax: _____ Email: _____

You may enter directly on the web at www.ccr.dlis.dla.mil

You may mail or fax completed registration to:

Department of Defense
Central Contractor Registration
74 Washington Avenue N Ste. 7
Battle Creek, MI 49017-3084

FAX: 616-961-7243

For registration assistance call 1-888-227-2423 or 1-616-961-4725